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PTO/SB/01 (10-00)  
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Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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<b>DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63)</b>  <input type="checkbox"/> Declaration Submitted with Initial Filing      OR <input checked="" type="checkbox"/> Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16(e)))	<b>Attorney Docket Number</b>	RCA 88650
	<b>First Named Inventor</b>	Debbie Indira Lewis
	<b>COMPLETE IF KNOWN</b>	
	<b>Application Number</b>	/
	<b>Filing Date</b>	
	<b>Group Art Unit</b>	
	<b>Examiner Name</b>	

As a below named inventor, I hereby declare that:

My residence, mailing address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

DIGITAL VIDEO APPARATUS USER INTERFACE

the specification of which.

(Title of the Invention)

☐ is attached hereto  
OR

☒ was filed on (MM/DD/YYYY)

July 20, 1999 ✓

as United States Application Number or PCT International

Application Number PCT/US99/16381 ✓ and was amended on (MM/DD/YYYY) August 25, 2000 ✓ (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above:

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I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign	Foreign Filing Date	Priority	Certified Copy Attached?	
			YES	NO
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	
60/093,423 ✓	July 20, 1998 ✓	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

[Page 1 of 2]

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# DECLARATION — Utility or Design Patent Application

Direct all correspondence to:

☐
Customer Number  
or Bar Code Label

OR

☒

Correspondence address below

Name JOSEPH S. TRIPOLI - PATENT OPERATIONSAddress THOMSON multimedia Licensing Inc.Address PO Box 5312City PRINCETONState NJZIP 08540Country USTelephone 609-734-9650Fax 1-609-734-9700

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SOLE OR FIRST INVENTOR:

☐

A petition has been filed for this unsigned inventor

Given Name

(first and middle [if any]) DEBBIE INDIRAFamily Name  
or SurnameLEWISInventor's  
Signature

Date

Residence: City NORCROSSState GACountry USCitizenship JAMAICAMailing Address 615 Ivy Chase Lane

Mailing Address

City NorcrossState GAZIP 30092Country US

NAME OF SECOND INVENTOR:

☐

A petition has been filed for this unsigned inventor

Given Name

(first and middle [if any]) PRATISH RATILALFamily Name  
or SurnameDESAIInventor's  
Signature

Date

Residence: City FremontState CACountry USCitizenship INMailing Address 34778 Comstock Common

Mailing Address

City FremontState CAZIP 94555Country US
☒ Additional inventors are being named on 1 supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.

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## DECLARATION

**ADDITIONAL INVENTOR(S)**  
**Supplemental Sheet**  
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<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor		
Given Name (first and middle (if any))		Family Name or Surname		
ROBERT HOWARD		MILLER		
Inventor's Signature			Date	
Residence: City	Leawood	State	KS	Country US
Mailing Address		2900 West 93rd Street		
Mailing Address				
City	Leawood	State	KS	Country US
ZIP		66206-1811		
Country		US		
<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor		
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Inventor's Signature			Date	
Residence: City		State		Country
Mailing Address				
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City		State		Country
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		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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# DECLARATION — Utility or Design Patent Application

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Name <u>JOSEPH S. TRIPOLI - PATENT OPERATIONS</u>							
Address <u>THOMSON multimedia Licensing Inc.</u>							
Address <u>PO Box 5312</u>							
City <u>PRINCETON</u>				State <u>NJ</u>		ZIP <u>08540</u>	
Country <u>US</u>			Telephone <u>609-734-9650</u>			Fax <u>1-609-734-9700</u>	
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.							
NAME OF SOLE OR FIRST INVENTOR :				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any]) <u>DEBBIE INDIRA</u>				Family Name or Surname <u>LEWIS</u>			
Inventor's Signature						Date	
Residence: City <u>NORCROSS</u>			State <u>GA</u>		Country <u>US</u>		Citizenship <u>JAMAICA</u>
Mailing Address <u>615 Ivy Chase Lane</u>							
Mailing Address							
City <u>Norcross</u>			State <u>GA</u>		ZIP <u>30092</u>		Country <u>US</u>
NAME OF SECOND INVENTOR:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any]) <u>PRATISH RATILAL</u>				Family Name or Surname <u>DESAI</u>			
Inventor's Signature <u>Pratish</u>						Date <u>2/5/2001</u>	
Residence: City <u>Fremont</u> <u>CA</u>			State <u>CA</u>		Country <u>US</u>		Citizenship <u>IN</u>
Mailing Address <u>34778 Comstock Common</u>							
Mailing Address							
City <u>Fremont</u>			State <u>CA</u>		ZIP <u>94555</u>		Country <u>US</u>
<input checked="" type="checkbox"/> Additional inventors are being named on <u>1</u> supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.							

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Mailing Address			
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☐ A petition has been filed for this unsigned inventor

Given Name

(first and middle [if any]) DEBBIE INDIRAFamily Name  
or SurnameLEWISInventor's  
SignatureDate 01/25/2001Residence: City NORCROSSGA.State GACountry USCitizenship JAMAICA ✓Mailing Address 615 Ivy Chase Lane

Mailing Address

City NorcrossState GAZIP 30092Country US

NAME OF SECOND INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name

(first and middle [if any]) PRATISH RATILALFamily Name  
or SurnameDESAIInventor's  
Signature

Date

Residence: City FremontState CACountry USCitizenship INMailing Address 34778 Comstock Common

Mailing Address

City FremontState CAZIP 94555Country US☒ Additional inventors are being named on 1 supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.



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Given Name (first and middle (if any))		Family Name or Surname	
<u>ROBERT HOWARD</u>		<u>MILLER</u>	
Inventor's Signature			Date <u>4-5-01</u>
Residence: City	<u>Leawood</u> <u>KS</u>	State <u>KS</u>	Country <u>US</u> Citizenship <u>US</u>
Mailing Address <u>2900 West 93rd Street</u>			
Mailing Address			
City	<u>Leawood</u>	State <u>KS</u>	ZIP <u>66206-1811</u> Country <u>US</u>
<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
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Inventor's Signature			Date
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